

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000027815 (6)

1. Corporation Name

HIGHSMITH & WRENN, INC.

APPROVED AND FILED  
1996 MAY -1 PM 12: 51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

1422 SAN MARCO BLVD  
JACKSONVILLE FL 32207

Mailing Address

1422 SAN MARCO BLVD  
JACKSONVILLE FL 32207

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

29 Zip 30 Country

3. Date Incorporated or Qualified

04/04/1995

3a. Date of Last Report

4. FEI Number

59-3303899

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

HIGHSMITH, PATRICIA J  
4127 TOBIN DR  
JACKSONVILLE FL 32257

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of the person who is registered agent for the corporation

Signature of the Agent or Director who is registered agent for the corporation

DATE

12. OFFICERS AND DIRECTORS

TITLE D HIGHSMITH, PATRICIA J DELETE  
NAME  
STREET ADDRESS 4127 TOBIN DR  
CITY- ST- ZIP JACKSONVILLE FL 32257

TITLE D WRENN, JULIE L DELETE  
NAME  
STREET ADDRESS 4127 TOBIN DR  
CITY- ST- ZIP JACKSONVILLE FL 32257

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE Change Addition  
12 NAME  
13 STREET ADDRESS  
14 CITY- ST- ZIP

21 TITLE Change Addition  
22 NAME  
23 STREET ADDRESS  
24 CITY- ST- ZIP

31 TITLE Change Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY- ST- ZIP

41 TITLE Change Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY- ST- ZIP

51 TITLE Change Addition  
52 NAME  
53 STREET ADDRESS  
54 CITY- ST- ZIP

61 TITLE Change Addition  
62 NAME  
63 STREET ADDRESS  
64 CITY- ST- ZIP

300001820603  
05/14/96--01086--005  
\*\*\*\*200.00 \*\*\*\*200.00

SCCS-1-94

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if checked, or on an attachment with an address.

SIGNATURE:

Julie L. Wrenn

JULIE L. WRENN

4/26/96

398-3431

CR2E034 (12/95)